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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR<br>COUNTRY<br>TX | SHEETS<br>DRAWING<br>2 | TOTAL<br>CLAIMS<br>25 | INDEPENDENT<br>CLAIMS<br>5 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                           |                        |                       |                            |
| Verified and<br>Acknowledged  | Examiner's Signature      | Initials               |                       |                            |

ADDRESS

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TITLE

COMMUNICATION SYSTEM POWER LOSS NOTIFICATION VIA DETECTION OF REVERSE BIAS STATE OF A DIODE BASED ON A THRESHOLD VOLTAGE

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>960 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue ) |
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